

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILED DATE
10/553,124	
APPLICANT'S	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2	1						52						
3	2						53						
4	2						54						
5	2	0					55						
6							56						
7	0						57						
8	0						58						
9	0						59						
10	0						60						
11	2						61						
12	2						62						
13	2						63						
14	2						64						
15	2						65						
16	2						66						
17	2						67						
18	0						68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
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41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2	↓		↓		↓							
TOTAL DEP.	26	←		←		←							
TOTAL CLAMS	28	██████████		██████████		██████████							

BEST AVAILABLE COPY